



**Your Health Plan, Your Doctors, and You:**  
The Prescription for Quality Health Care









# Quality Ingredients

Have you ever thought about what quality health care is and wondered how to get it? The quality of your health care is largely determined by three elements: 1) your health plan and the services it provides; 2) your choice of doctor and your interactions with him or her; and, 3) the lifestyle choices you make and the actions you take to prevent health problems, and to properly manage any problems that occur. Quality health care results from an effective partnership between your health plan, your doctors, and you.

The best combination of these elements will be different for each person and will depend on your location, your age, your health status, and other factors. This booklet provides a variety of information that will help you make more informed health care choices. It also includes some Quality Care Tips, Checklists, and other information to guide you as you interact with your doctor and manage your health.

By asking discerning questions of your health plan and doctor, and reviewing available patient satisfaction ratings and effective care measures, you can choose the health plan and doctor that are best for you. Then, by making healthy lifestyle choices — and taking full advantage of the benefits offered by your plan — you can get the quality health care you need.

## Increasing the Value of Your Health Benefits

Value means getting quality health products at a reasonable cost. When each CalPERS member makes wise choices that maximize health and minimize illness and disease, that helps us keep health care costs down. If everyone does their part, we can make big strides toward maximizing the value of the CalPERS Health Benefits Program. And, making wise health choices also helps you, because when you are healthy, you can enjoy life to its fullest.

In collaboration with our health plans and providers, we are continually measuring the quality of care we provide, sharing best practices, and working together to improve health care for our 1.2 million members.

### Table of Contents

Quality Ingredients .....	1
Choosing Your Health Plan .....	2
Choosing Your Doctor, Hospital, and Medical Group .....	8
Taking Responsibility for Your Health .....	17
Detailed Member Satisfaction Ratings .....	22
Personal Health Toolkit .....	26
Resources .....	32

The first element of quality health care is your health plan. As you choose your plan, you will need to consider which features and benefits are most important. You can then review your options and make an educated decision. Following are some of the things you might want to consider when choosing a health plan:

- What are the costs (premium, co-pay, deductibles, out-of-pocket costs)?
- Does the plan provide access to the doctors and hospitals you want?
- Are performance ratings and patient safety and satisfaction data available for the hospitals, doctors, and/or medical groups in the health plan? If so, what are the results?
- What member satisfaction and effective care measures are important to you (e.g., health plan customer

service, pharmacy services, or effective care measures for treating a chronic condition)? How does the health plan score in the areas that are most important to you?

- What special programs does the health plan provide (e.g., nurse help lines, health education, wellness programs, disease management)? For more specific information, you can visit each plan's Web site or call the plan's customer service number. (See page 32 for health plan Web site addresses and phone numbers.)

CalPERS provides the *Health Plan Chooser* to help you make an informed decision about the best plan for yourself and your family. This online tool allows you to view overall plan satisfaction and quality ratings, search for specific doctors, and compare premiums. The *Health Plan Chooser* is available on the CalPERS Web site at [www.calpers.ca.gov](http://www.calpers.ca.gov).

# Choosing Your Health



Plan





# Member Satisfaction Ratings



Every year, CalPERS conducts a survey of 1,100 members in each Basic and Medicare health plan that has at least 2,000 members. We use the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey, which is a standard tool for measuring health plans. This year, every plan except the Medicare plans of California Correctional Peace Officers Association (CCPOA) and Peace Officers Research Association (PORAC) had enough members to survey.<sup>1</sup> For the smaller health plans, the number of members surveyed represents a larger percentage of the total covered lives in those plans. This results in a higher ratio of survey respondents to adult members served.

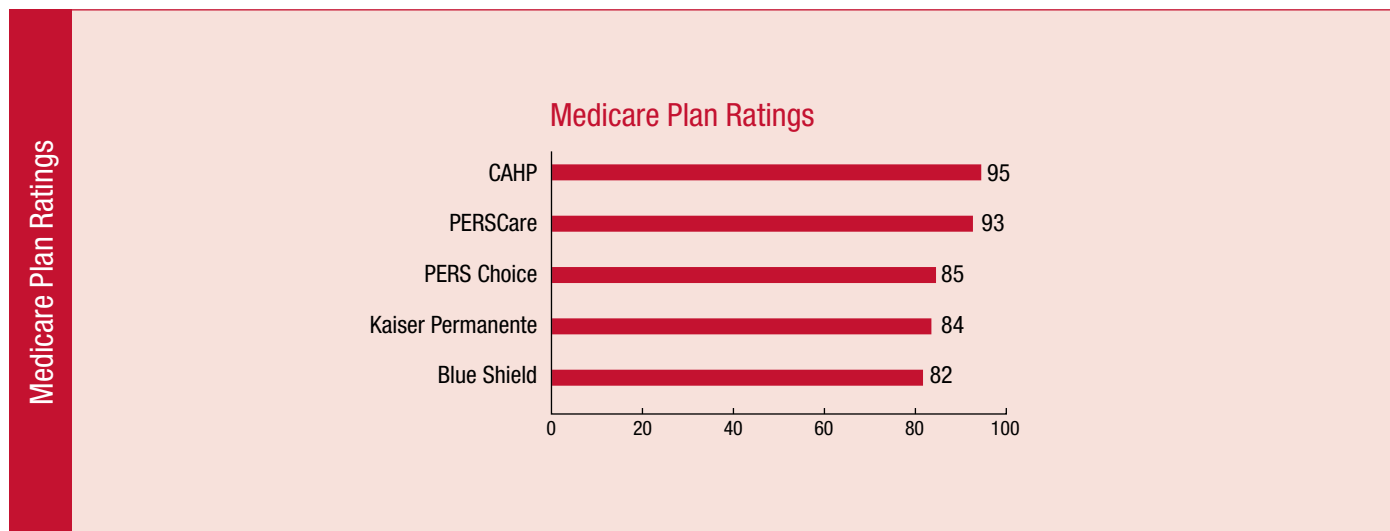
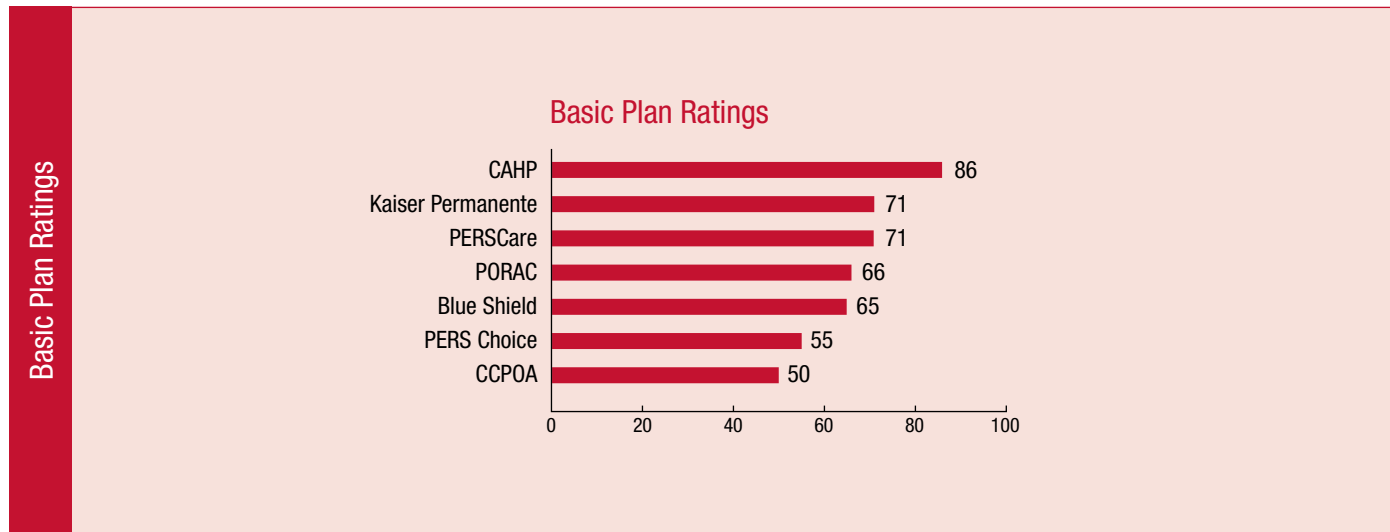
Reviewing how other CalPERS members rate the health plans in various areas can help you choose your plan. Be aware that your experience may differ depending on your health care needs, your expectations and behavior, and your provider and treatment choices.

We encourage you to look at the ratings for each plan, consider other information we've provided, and do your own research using the outside resources identified in the Detailed Member Ratings of Health Plans section beginning on page 22.

<sup>1</sup> You must be a current Association member to access the Association plans.

# Plan Ratings

**Overall Ratings for Plans** The following charts show the percentage of each plan's members who gave the plan an overall rating of 8-10 on a 10-point scale.



For the Basic plans, the margin of error is plus or minus about 5 percent, except for CCPOA. The CCPOA Basic plan has a margin of error of plus or minus about 6 percent. For the Medicare plans, the margin of error is plus or minus about 3.5 percent.

CCPOA = California Correctional Peace Officers Association

CAHP = California Association of Highway Patrolmen

PORAC = Peace Officers Research Association of California





# Clinical Performance Measures

CalPERS collects clinical performance measures so that we can see what percentage of members in each plan received care according to accepted standards. The National Committee on Quality Assurance (NCQA) develops these measures. HMOs collect more measures than PPOs, but many measures are common to both types of plans. CalPERS has combined the results of these common measures into an overall clinical score for each plan so that you can see how plans compare in clinical performance.

In reviewing clinical scores for the plans, remember that high quality care results from a partnership between your health plan, your doctors, and you. Several things need to happen for a plan to receive a high score in clinical quality measures:

- The plan must offer a provider network that includes enough qualified providers to deliver effective care when and where members need it.
- Members need to seek the right care.
- Doctors and other providers need to develop a treatment plan, discuss it with their patients, and order any needed tests or care.
- Patients must obtain the service or follow the treatment plan.
- The health plan needs to receive the data showing that patients obtained the recommended care.

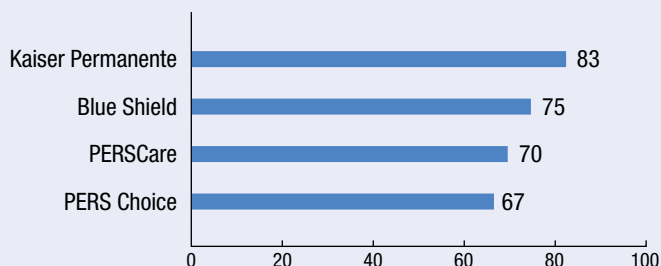


# Overall Clinical Performance Charts

CalPERS has partnered with our HMO and PPO health plans to measure how each plan performs in relation to the others. We provide these scores so you can get a sense of what percentage of members in each plan received care that has proven to be effective. These scores are a composite, or average, of the individual measure scores for each plan.

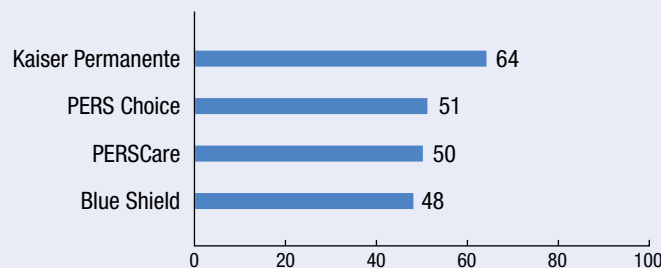
## CalPERS 2007 Medical Composite

This chart provides a composite (average) showing the percentage of members who received care such as immunizations and cancer screenings, and care for acute medical and chronic conditions (e.g., heart disease).



## CalPERS 2007 Mental Health Composite

This chart provides a mental health composite (average) showing the percentage of members who received mental health care for depression treatment, and follow-up after hospitalization for mental illness.



These are overall clinical quality scores; remember that the quality of care you experience as an individual depends on your health care needs, provider practices, access to care in your area, as well as your expectations, behavior, and provider and treatment choices. To learn more about specific quality measures that are applicable to you, review the Indicators of High Quality Care section on pages 28-29.

CalPERS is committed to working with our members, our plans, and our providers to ensure that members receive the right care every time.

# Choosing Your Doctor, Hospital, and Medical Group

Once you choose a health plan, you will need to find a primary care doctor. The doctors you can use — and the medical groups and hospitals you will have access to — will depend upon your choice of health plan. If you want to use a specific doctor, you can use the *Health Plan Chooser* tool — available on the CalPERS Web site at [www.calpers.ca.gov](http://www.calpers.ca.gov) — to find out which plans include your doctor. You can also call the doctor's office to find out whether that doctor affiliates with the plan you are considering and is taking new patients in that plan.

This section provides valuable information for choosing a doctor, medical group, or hospital, and for managing your interactions to get the best care possible.





# Choosing Your Doctor

Many people find their doctor by asking neighbors or co-workers. Others receive referrals from doctors they already know. And still others simply pick a physician from their health plan who happens to be nearby — and hope for the best.

In a Health Maintenance Organization (HMO), your doctor must be contracted with the health plan. In a Preferred Provider Organization (PPO), the health plan will cover more of the cost if your doctor is on the health plan's list of preferred providers.

Following are some questions you may want to ask when selecting a doctor:

- Where is the doctor's office?
- How long has the doctor been in practice?
- What are the office hours and appointment availability?
- Where did the doctor go to medical school and receive training?
- Does the doctor use nurse practitioners or physician assistants in the office? This could help you schedule more timely appointments for routine matters.
- Is the doctor board-certified in a specialty? You might choose a primary doctor for yourself and your family members from one of the following specialties: family practice, internal medicine, geriatrics, or pediatrics. Some obstetrician/gynecologists also provide primary care.
- Does the doctor speak your language and understand your culture?
- What hospitals does the doctor use? Do these hospitals report quality measures, and how do they rate?
- How much experience does the doctor have in providing the care you need?
- Does the doctor use electronic medical records? (See below as to why this may be important.)
- Is the doctor associated with a medical group that participates in the Pay for Performance Initiative? (See page 15 for an explanation of the Pay for Performance Initiative.)

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## *If You Were Wondering...*

### **Why Are Electronic Medical Records a Good Thing?**

In recent years, many medical groups and private practice doctors have started using electronic medical records. These computer-based systems use elaborate security measures to protect access and ensure the confidentiality of your health information. Electronic medical records have many advantages, including the following:

- Doctors at different locations can access your records and review tests and treatments performed by other providers.
- All your health history, as well as lab results, x-rays, and test results, are in one central database. This prevents unnecessary duplication and improves monitoring.
- All doctors who treat you can review your medication information to reduce the potential for harmful drug combinations.



# 6 Quality Care Tips:

## Communicate with Your Doctor

Your doctor will have a limited amount of time to spend with you. You can make the most of that time by being organized and communicating effectively. Following are a few tips to help you:

- 1 If you are seeing your doctor for a specific concern, write down all your symptoms and when you first noticed them. Also write down anything that makes the symptoms better or worse.
- 2 Write down your questions prior to your appointment and have your list handy when your doctor comes into the exam room.
- 3 Have space on the paper to note his or her answers. Ask additional questions if you do not understand something. If the doctor gives you complicated instructions, ask for them in writing.
- 4 If your doctor recommends additional tests, ask about the purpose of the tests and how your doctor will notify you of the results. Schedule an appointment for the tests right away, and be sure to get the results.
- 5 Your doctor may refer you to a specialist for further evaluation. When you see the specialist, be sure he or she has access to all your test results and understands your symptoms. Ask any specific questions you have and write down the answers.
- 6 Ask a friend or family member to come with you to your doctor visit if you need help.

## Tell Your Doctor Everything

Your doctor will be able to provide you with the best health care if he or she has a complete picture of your health history and current health status. When you visit your doctor for the first time, you should provide the following information:

- Family health history (i.e., cancer, diabetes, heart disease, Alzheimer's, stroke, cataracts, osteoporosis, etc.)
- Complete personal health history (Don't leave anything out; your doctor needs to know everything.)
- All prescription medications you are taking — even if you only take them occasionally
- Any over-the-counter drugs you are taking, including vitamins, supplements, and herbs.
- Medication and other relevant allergies, such as reactions to anesthesia or allergy to latex gloves
- Any special needs or concerns you have, including your wishes for end-of-life care



# Considering Your Hospital Choices

If you need to be hospitalized, your health plan or medical group will have certain hospitals that you are able to use. If you prefer a particular hospital, you should make sure the plan you select contracts with that hospital.





# Quality Care

## Checklist: Making the Best Choice When You Need Hospital Care

If you or a loved one needs to be hospitalized for treatment that is planned ahead of time and you have a choice of hospitals, here are some tips to help you make your choice:

- Ask your doctor which hospital he or she uses and recommends.
- If you need a complex procedure, ask the doctor and hospital how many of these procedures they do and what their outcomes are (generally the more they do, the better the results).
- Be aware that hospitals differ in their performance and cost. A hospital that performs well in providing one type of care may not necessarily perform as well in providing other types of care. Use the CalHospitalCompare Web site ([www.CalHospitalCompare.org](http://www.CalHospitalCompare.org)), and other sites listed in the Resources section on page 32 to review hospital quality and patient satisfaction information.
- If you can, use a hospital that reports its performance over one that does not.
- Find out if the hospital's rules and services — visiting hours, overnight guests, rooms, etc. — meet your needs.

### Quality Care Tip:

## Complete an Advance Directive

Before you or a loved one is hospitalized, be sure to complete an Advance Directive that states your preferences for health care and end-of-life care in the event that you are unable to speak or make decisions for yourself. Make sure that the hospital, your doctor, and your family all have copies of your signed Advance Directive. Hospitals usually have these forms available or you can download one from the Web sites listed in the Resources section at the back of this booklet.



# 10 Quality Care Tips: Avoid Complications in the Hospital

In its *Fourth Annual Patient Safety in American Hospitals Study*, HealthGrades, Inc. found that between 2003 and 2005, more than one million preventable patient safety incidents occurred in hospitals across the United States. The study included a review of more than 40 million Medicare hospitalization records. Additionally, according to the Centers for Disease Control (CDC), in 2002, there were an estimated 1.7 million health care-associated infections in U.S. hospitals. The CDC estimated that 99,000 people died from these infections.<sup>1</sup>

While these figures may be alarming, following are some steps you (or your family members) can take to avoid complications while in the hospital:

- 1 Verify the information on your ID bracelet. Make sure that your nurses and other providers check your identity before administering any treatment or medication.
- 2 Be sure your medical chart indicates all prescription medications, over-the-counter drugs, and supplements that you take.
- 3 Notify the nurses and doctors of all medication allergies as well as any allergies to anesthesia, latex, and food ingredients.
- 4 Be aware that hospitals and other medical facilities must use “universal precautions” to protect health care workers and patients from infections. Health care personnel must wash their hands in between patients and use gloves when they come in contact with a wound, blood, or other body fluids. If you don’t see health care personnel wash their hands before providing care to you, ask them if they have done so.
- 5 If you are having surgery, ask the doctor to mark the surgery site before you are taken into the operating room. You or a trusted family member should agree that the marking is on the correct part and side of your body.
- 6 If you have an intravenous line (IV), ask the nurse how long the administration of the IV will take, and notify the nurse if you have pain or swelling at the site. IVs should usually be attached to machines that control the flow rate.
- 7 If you have any questions or concerns about your care, ask the doctor or nurse. You have the right to question or refuse any care that does not seem appropriate to you.
- 8 If possible, ask a family member or friend to stay with you, especially the day after a surgery.
- 9 When you leave the hospital, ask for written instructions. Make sure you understand how to take care of yourself, what medications to take, and when you need to see your doctor again. Be sure to follow all discharge instructions.
- 10 Finally, if you believe you are not receiving the care you need while hospitalized, you can ask to speak with the Patient Advocate or Ombudsman available at most hospitals.

<sup>1</sup> “Hospital Errors Rise to Three Percent; HealthGrades Patient Safety Study”, HealthGrades Press Release, April 3, 2007



## Understanding Your Medical Group

If you enroll in an HMO, it's likely that your primary care doctor belongs to a medical group that contracts with the HMO. HMOs delegate many functions to medical groups, including treatment authorization, specialty referrals, and initial grievance processing.

In choosing a medical group, you may want to know how the group scores on member satisfaction issues such as timely referrals; access to primary and specialty care; and member services. Some medical groups also report clinical quality information. See the Resources section on page 32 to obtain provider access and other quality information.

If you choose a PPO, you should find out if your doctor is in a medical group, because medical groups provide much of the same support to PPO members as they do to HMO members.

Blue Shield and many of its contracting medical groups, as well as Kaiser Permanente and its medical groups, participate in the Integrated Healthcare Association's Pay for Performance Initiative. This Initiative rewards medical groups that score highly on HMO member satisfaction, clinical quality, and use of information technology, such as electronic medical records. Medical group scores are available on the Office of the Patient Advocate (OPA) Web site listed in the Resources section of this booklet.





Taking Res  
Your Health

# responsibility for

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You play a key role in determining the quality of your health. Your daily decisions and actions can have a positive or negative impact on your overall health. By doing what you can to stay healthy, you can keep your health care costs down and enhance your ability to live well at every stage of life. You can also contribute to controlling health care costs for all CalPERS members.

Taking responsibility for your health has three key elements: 1) set and achieve healthy lifestyle goals; 2) partner with your doctor to make any necessary treatment decisions — and follow through; and, 3) make regular health screenings a priority.

## Set Healthy Lifestyle Goals

Engaging in healthy behaviors and avoiding unhealthy ones will improve the quality of your life. People who eat right, exercise, don't smoke, and drink no more than a moderate amount of alcohol are far less likely to face conditions such as diabetes, heart disease, cancer, and depression than people who don't practice these healthy behaviors.

The worksheet on page 27 can help you set personal health goals and develop the motivation to meet those goals. When trying to change any behavior, remember this: Research indicates that it takes about 21 days to develop a habit. If your goal is to walk for at least 15 minutes three times a week, don't get discouraged if you only manage to do it once or twice during the first few weeks. Don't give up. Once you achieve your goal and maintain it for three to four weeks, you'll develop a habit and it will be easier to maintain that healthy practice.

# Quality Care Tip: Maintain a Healthy Weight

Being overweight increases your risk for diabetes, heart disease, stroke, osteoarthritis, and certain cancers. Most people should evaluate their weight using the body mass index (BMI). The BMI shows the relationship between your height and weight. A BMI of 18.5 to 24.9 indicates a normal weight.

The BMI may overestimate body fat in athletes and others with a muscular build. It may underestimate body fat in older people and those who have lost muscle mass. In addition to BMI, a waist circumference measurement can also help you determine if you are at a healthy weight. (See the Resources on page 32 for Web sites that provide further information.)

Refer to the table on page 31 to determine whether you are at a healthy weight. If your BMI indicates that you are not at a healthy weight, consider the benefits of losing weight. Being overweight is usually caused by a combination of poor eating habits and lack of exercise.

If you are significantly overweight, you may benefit from a structured weight loss program. Talk to your doctor and check with your health plan about any programs they offer. If you are only slightly overweight, you may be able to shed those few extra pounds by developing healthier eating habits and adding regular exercise to your daily routine.

The U.S. Department of Agriculture recently revised its nutrition guidelines to consider age and gender. The new guidelines also include a recommended level of physical activity. See the Web site listed in the Resources section for more information.

You *can* begin to make the changes necessary to attain a healthy weight — one step at a time.





## If You Were Wondering... How Can I Be More Active?

Exercise doesn't have to mean going to a gym or health club. Here are some easy ways you can get regular exercise:

When you take a break at work, go for a walk. Keep walking shoes at your desk to make this easier. Invite a co-worker to make it fun.

When you go shopping, park your car a bit farther from the entrance and walk the extra distance.

Before you start shopping, walk the mall a couple of times.

If stairs are readily available, use them instead of an elevator or escalator.

Instead of letting the dog out in the backyard, take him for a walk or a run around the park. Take the kids too, and get them in the habit of running around instead of watching TV or playing video games.

## Partner With Your Doctor to Make Healthy Decisions

Another way you can take responsibility for your health is to be proactive. See your doctor regularly to discuss your health status and to find out if you need to schedule any health screenings.

If your doctor says you have a particular condition or disease, be sure you understand the diagnosis and treatment plan. Ask questions about your treatment options. Learn all you can about the condition. Some questions you might ask include:

- What are my treatment options?
- What are the likely outcomes for each option?
- What treatments do you recommend?
- What will happen if I do nothing?
- Can I make any lifestyle changes that will help manage the condition (or prevent it from recurring)?
- Can you recommend any resources that will help me better understand the condition?

If you feel uncertain about the course of treatment your doctor recommends, ask for a second opinion. Contact your health plan or medical group to find out the procedure for doing this.

Once you and your doctor agree to a treatment or management plan, follow it carefully. Take all prescribed medication as instructed. Schedule and keep appointments to monitor the condition. And learn about lifestyle changes you can make to alleviate symptoms or improve the likelihood of a full recovery.





## Make Regular Health Screenings a Priority

Regular health screenings — as recommended based on your gender, age, and health history — detect health problems early, when management and treatment can be the most effective. Following is a description of some key health screenings you should discuss with your doctor:

- **Cancer screenings:** For most cancers, the key to successful treatment is early diagnosis. For instance, breast, cervical, colorectal, and prostate cancer can have good outcomes if they are detected and treated early.
- **Bone Density Screening:** If indicated by family and personal health history, a bone density test will let you know your risk level for osteoporosis and bone fractures, enabling you to start appropriate preventive measures early.
- **Diabetes Screening:** If indicated by family and personal health history, a regular blood sugar test can detect diabetes and allow for early management of the disease. Untreated diabetes can have serious health consequences including heart disease, stroke, blindness, loss of limbs, kidney disease, and nerve damage.
- **Sexually Transmitted Disease Testing:** If you are at risk for sexually transmitted diseases, you should have regular screenings. Some diseases, such as chlamydia (in women), have few or no symptoms. Screening allows for early detection and treatment, which can prevent infertility and other potentially damaging effects of sexually transmitted diseases.

Use the *Personal Health Screening Checklist* on page 30 to determine what screenings you need and to record the date you have the test.

## 3 Quality Care Tips:

### Research Your Health Condition

The resources available on the Internet make it easy to learn about health conditions, research the pros and cons of treatment options, and get information about a medication. While the Internet is a useful tool, it is not a substitute for your doctor's evaluation and treatment. If you have been diagnosed with a specific medical condition, be sure to ask your doctor before following any advice found on the Internet. This includes taking any supplements advertised and sold via the Internet. (See the Resources section on page 32 for a list of some good health information Web sites.)

### Actively Manage Chronic Conditions

If you have a chronic condition such as hypertension, diabetes, asthma, or heart disease, active management can help you stay as healthy as possible. Appropriate management can also minimize the likelihood of complications.

All CalPERS health plans provide disease management programs. These programs address coronary artery disease, congestive heart failure, diabetes, asthma, chronic lung disease, and depression in members with chronic illnesses. Our health plans also provide case management for members with complex, serious conditions, such as premature infants, multiple chronic diseases, and advanced cancer. If you are changing plans, check with the plans you are considering to see if they offer the programs you need. You can go a step further by taking advantage of wellness incentives and other activities offered by your health plan. Contact your health plan to get information about the programs they offer. Health plan phone numbers and Web sites are provided in the Resources section of this booklet.

### Break the Smoking Habit

Smoking cigarettes increases your risk of lung cancer, chronic bronchitis, and emphysema. It also causes heart disease, circulatory problems, and ulcers. Smokers get more colds than non-smokers. The children of smokers have higher rates of asthma and pneumonia, and their lungs may develop poorly due to exposure to secondhand smoke.

No matter how few or how many cigarettes you smoke, quitting smoking is one of the most important things you can do to improve your health. You'll also be helping the people around you by not exposing them to secondhand smoke.

All CalPERS health plans provide smoking cessation programs. In addition, you may contact the American Lung Association at (800) LUNGUSA, or (800) 586-4872, and ask about its "Freedom From Smoking®" program.





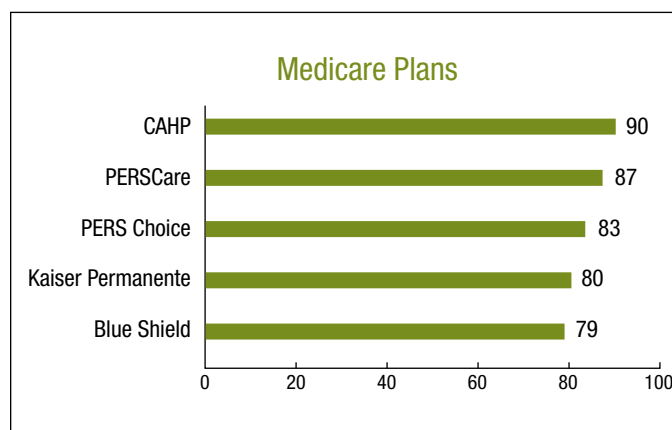
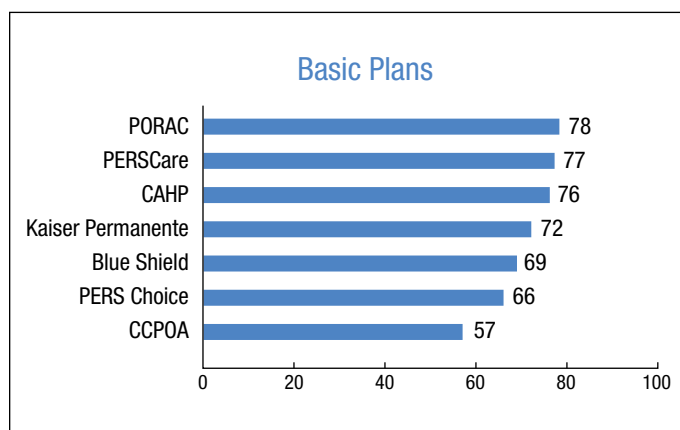
A full-page photograph of a smiling male healthcare worker, likely a nurse or doctor, standing in a brightly lit hospital hallway. He is wearing blue scrubs, a blue surgical cap, and blue shoe covers. A white surgical mask is hanging from his neck, and a stethoscope is around his neck. He is holding a white clipboard in his left hand. The hallway has a polished floor that reflects the lights, and an 'EXIT' sign is visible in the distance.

# Detailed Member Ratings of Health Plans

We provided overall member ratings for health plans on page 5 of this booklet. The following charts offer more details about how members rated the plans in several specific measures. You can use these detailed ratings to guide you in selecting your health plan.

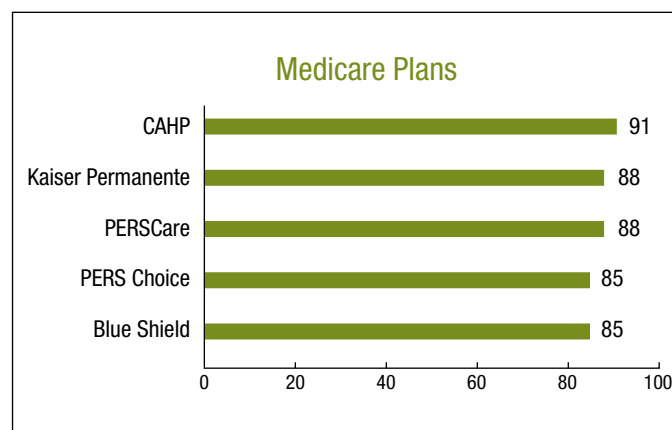
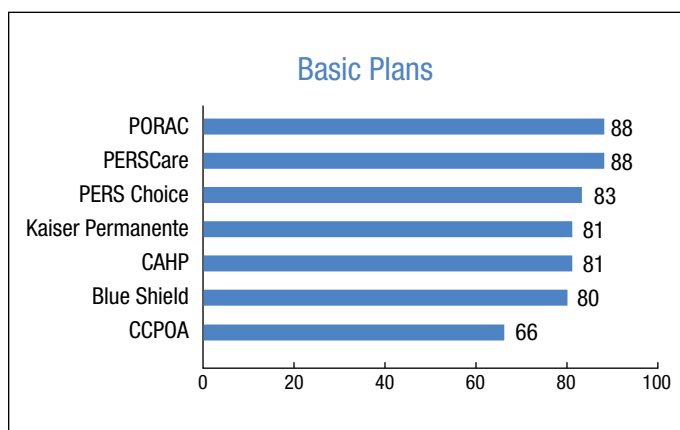
## Rating of All Health Care

Percentage of members in each plan who rated all of their health care 8-10 on a 10-point scale.



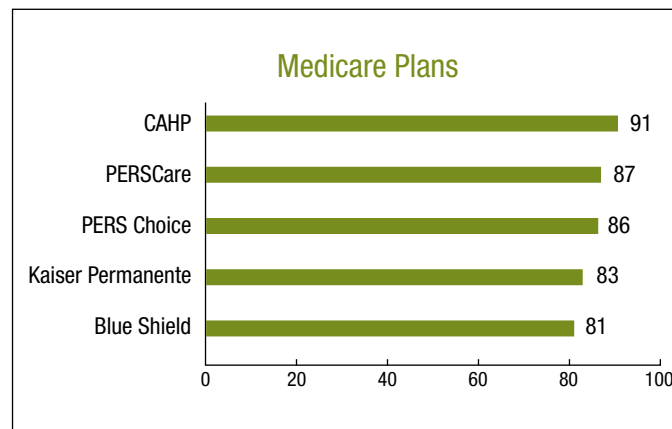
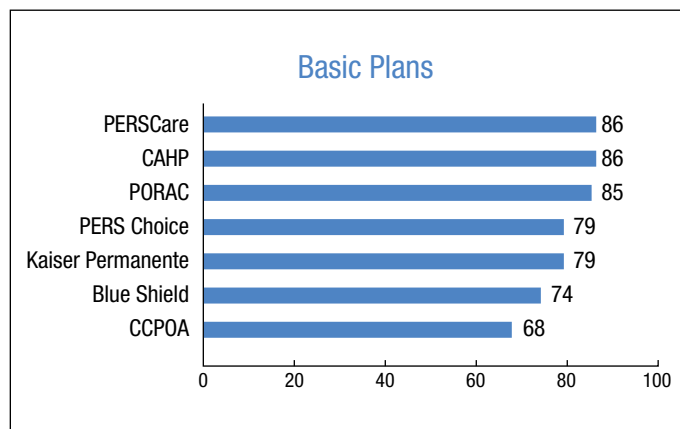
## Overall Rating of Personal Doctor

Percentage of members in each plan who rated their personal doctor 8-10 on a 10-point scale.



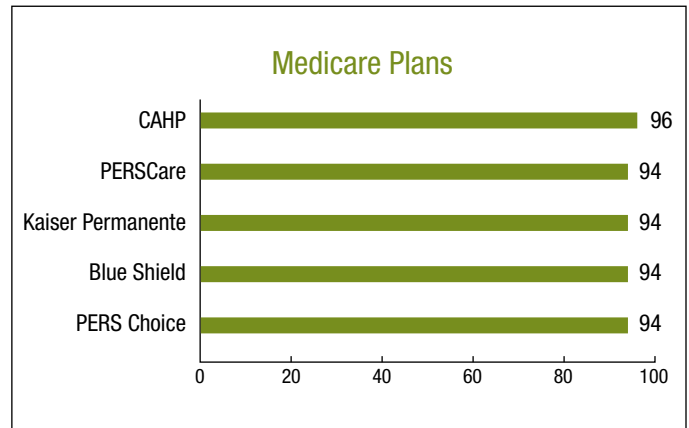
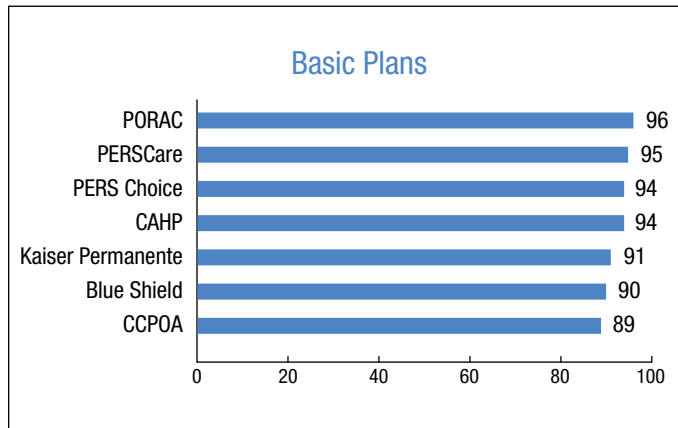
## Overall Rating of Specialist

Percentage of members in each plan who rated the specialist they saw most often 8-10 on a 10-point scale.



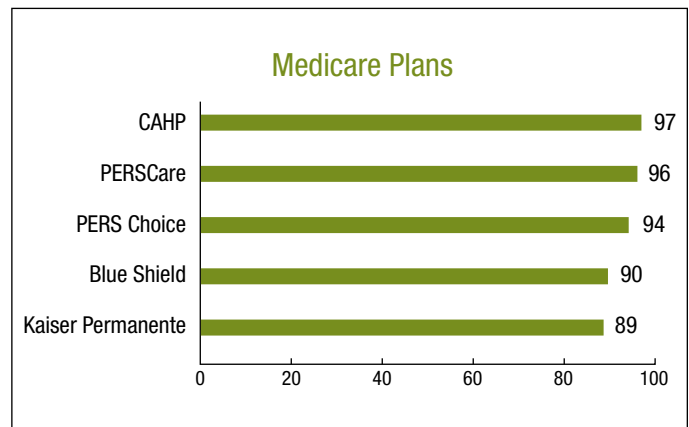
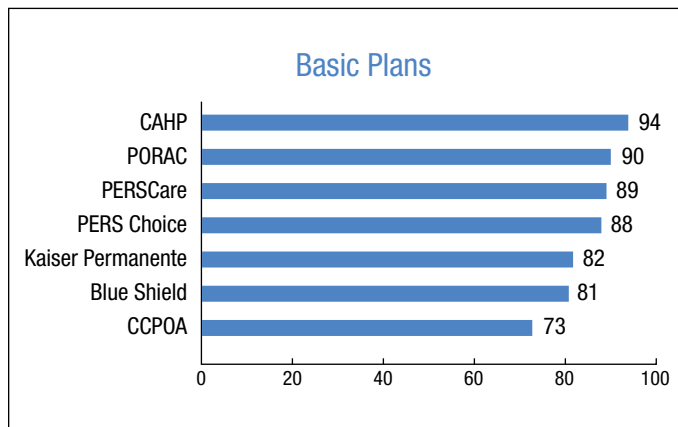
## How Well Doctors Communicate

Percentage of members who responded “usually” or “always” to questions about how often their doctor communicated well with them (i.e., doctor explained things in a way that was easy to understand, doctor listened well, doctor spent enough time with member).



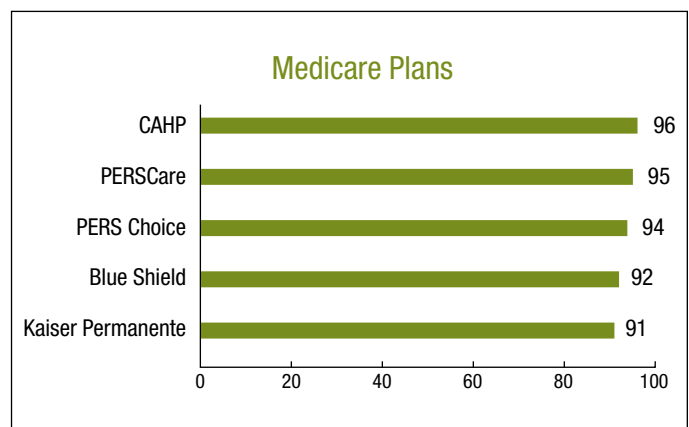
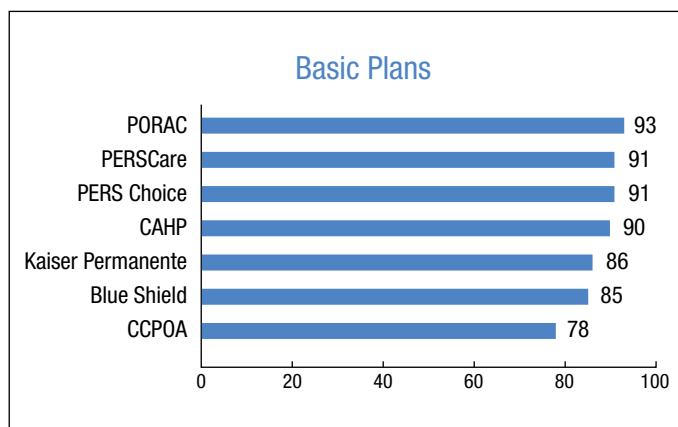
## Getting Needed Care

Percentage of members who responded “usually” or “always” when asked how often it was easy to get appointments with specialists, and to get the care, tests, or treatment they felt they needed.



## Getting Care Quickly

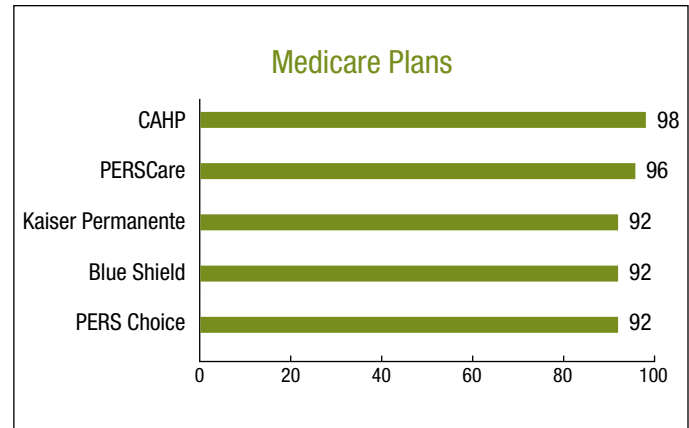
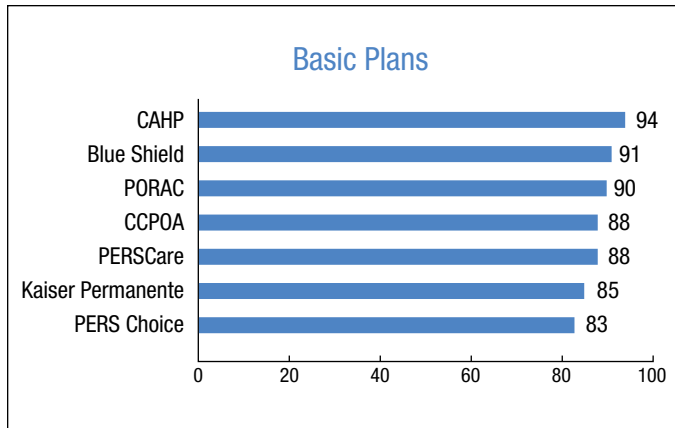
Percentage of members who said they could “usually” or “always” get urgent and routine care as soon as they thought they needed it.





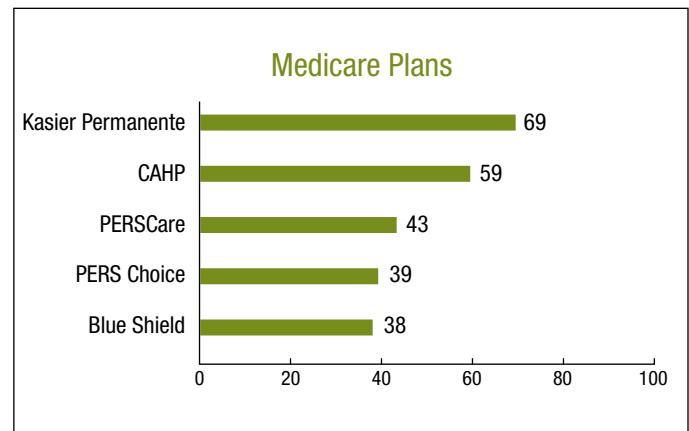
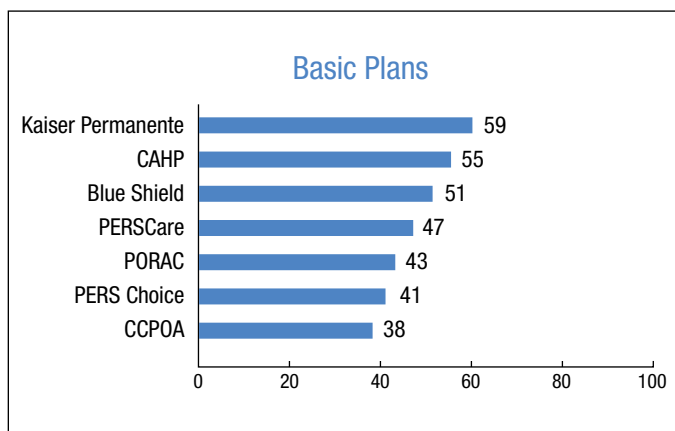
## Health Plan Customer Service, Information, Paperwork

Percentage of members who stated that their health plan “usually” or “always” provided what they needed in the areas of customer service, information, and paperwork (i.e., being treated with courtesy by health plan staff, ease of completing forms, getting needed help from plan).



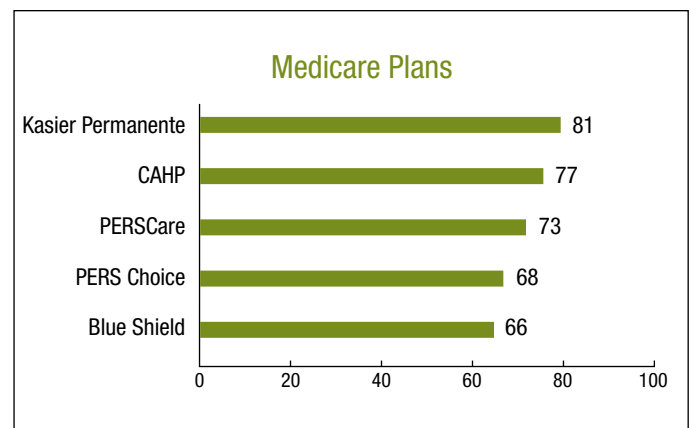
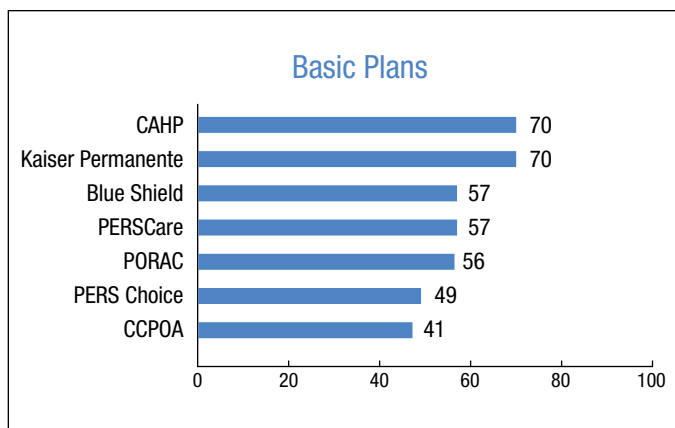
## Billing Accuracy

Percentage of members who stated their bills are always correct.



## Ease of Getting Prescriptions

Percentage of members who reported it is always easy to get prescriptions.



For the Basic plans, the margin of error is plus or minus about 5 percent, except for CCPOA. The CCPOA Basic plan has a margin of error of plus or minus about 6 percent. For the Medicare plans, the margin of error is plus or minus about 3.5 percent.

CCPOA = California Correctional Peace Officers Association; CAHP = California Association of Highway Patrolmen; PORAC = Peace Officers Research Association of California



# Personal Health Toolkit

Throughout this booklet, we have described many actions you can take to be responsible for your health. This section provides a few tools that can help you monitor and manage your health status.

# My Plan for Quality Health Care

The following chart can help you define personal health goals, give yourself the motivation to work towards them, and establish rewards for meeting them.

How am I doing in minimizing my risk factors for health problems?	Diet and exercise?										
	Alcohol, tobacco, or drug use?										
	Health screening tests?										
	Mental health?										
	Managing a chronic condition?										
My goals:	1.										
	2.										
	3.										
	4.										
	5.										
Steps I will take:	What	When	How often								
	1.										
	2.										
	3.										
	4.										
Benefits I will get from meeting these goals:	•										
	•										
	•										
	•										
	•										
Barriers that might get in my way:	•										
	•										
	•										
How I will overcome these barriers:	•										
	•										
	•										
Who can help me with my goals? How?	•										
	•										
	•										
Dates I will check my progress:	•										
	•										
How I will reward myself for meeting my goals:	•										
	•										
My confidence that I will meet my goals. <i>(Circle the number that most closely matches your confidence level):</i>	0	1	2	3	4	5	6	7	8	9	10
	Not at all confident										
	Totally confident										

Sign this contract: \_\_\_\_\_  
Signature
Date

Post this contract where you will see it every day!



# Indicators of High Quality Care<sup>1</sup>

By working with your doctor to make sure that you receive appropriate care, you can be an active partner in protecting your health and improving your health plan's quality scores. The indicators below are only guidelines — your needs may differ.

Use the *Personal Health Screening Checklist* on page 30 to keep track of your health screenings and tests. Parents can obtain an immunization checklist to track their child's shots from their child's doctor.

CalPERS monitors health plans in the following areas and works with them to continually improve the quality of care for all CalPERS members. The measures below are minimum requirements and consider the entire population. Your individual needs may exceed those listed below. Discuss your individual needs with your doctor.

Indicator	Description
<b>Cancer Screening</b>	
Breast Cancer Screening	Women ages 40-69 should have at least one mammogram every two years.
Colorectal Cancer Screening	Adults ages 51-80 should have a test for blood in the stool, a sigmoidoscopy, a colonoscopy, or a barium enema. Discuss the appropriate test and timeframe with your doctor.
Cervical Cancer Screening	Women ages 21-64 should have at least one Pap test every three years.
<b>Care for Children</b>	
Childhood Immunizations: Check with your doctor for the appropriate schedule for your child.	Children should have the following vaccines by their second birthday: four diphtheria and tetanus; one pertussis; three polio; one measles, mumps, and rubella (MMR); three H influenza B (HIB); three hepatitis B; one chicken pox (VZV); and four pneumococcal conjugate vaccines.
Adolescent Immunizations: Check with your doctor for the appropriate schedule for your adolescent.	Adolescents should receive a second MMR; three hepatitis B; and a second VZV by their 13 <sup>th</sup> birthday. Children may receive these earlier.
Use of antibiotics in children with upper respiratory infections (colds)	Children with an upper respiratory infection (URI) should not be given a prescription for antibiotics within 3 days of the diagnosis to allow time to get better without it. Antibiotics are not appropriate treatment for a simple URI.
Use of antibiotics in children with sore throats	Children with a sore throat should be tested for strep and should not be given an antibiotic unless they have a positive test.
Attention Deficit Disorder (ADD)	Children with ADD should have a follow up visit with a provider within 30 days after starting medication; should stay on the medication for at least 210 days; and should have at least 2 follow up visits within 9 months after the first 30 days on the medication.
<b>Maternity Care</b>	
Visits during pregnancy	Pregnant women should start prenatal care in the first trimester of pregnancy to make sure that the mother and the unborn baby stay healthy.
Visits after delivery	Women should see a provider for a checkup 21 to 56 days after delivery.
<b>Screening for Sexually Transmitted Diseases</b>	
Chlamydia screening for women 16-26	Sexually active women in this age group should receive at least one chlamydia test every year. A woman can have chlamydia with no symptoms, and the infection can cause permanent harm if it is not treated.
<b>Chronic Obstructive Pulmonary Disease (COPD)</b>	
Appropriate medication to control COPD (e.g., chronic bronchitis or emphysema)	People with COPD should use appropriate inhalers (beta 2 and anticholinergics) to reduce symptoms.
<b>Asthma</b>	
Medications for people with persistent asthma	Children and adults with persistent asthma should receive appropriate medication for long-term control (inhaled steroids, leukotriene modifiers, or nedocromil). Regular use of medications can prevent irreversible lung damage and improve function and quality of life.

Indicator	Description
<b>Care for People Over 65</b>	
Osteoporosis management in women who have had a fracture	Women over 65 who have had a fracture should have a bone density test and, if needed, a prescription for a drug to prevent or treat osteoporosis.
Drugs to be avoided in the elderly	People over 65 should not receive certain drugs. Tell your doctor and pharmacist about all the drugs you take, only take drugs that are absolutely necessary, and be careful to take them as prescribed.
<b>Adult Medical Care</b>	
Use of antibiotics in adults with bronchitis	Adults with acute bronchitis should not receive an antibiotic within three days of diagnosis to allow time to get better without antibiotics. Antibiotics are frequently not necessary.
Imaging studies for low back pain	People with uncomplicated low back pain should not receive imaging studies (X-ray, MRI, CT scan) within 28 days of diagnosis. Many times such pain goes away on its own with conservative treatment.
Drugs for rheumatoid arthritis	People with rheumatoid arthritis should receive a disease modifying anti-rheumatic drug (DMARD) to avoid joint damage.
Annual monitoring of patients on regular medications	People taking angiotensin converting enzyme (ACE) inhibitors, angiotensin receptor blockers (ARBs), digoxin, diuretics, or anticonvulsants should receive blood tests at least annually to monitor their response to these medications.
<b>Indicators of Good Diabetes Care and Control</b>	
Testing and controlling blood sugar	People with diabetes should have at least one hemoglobin A1c test per year to determine how well blood sugar is controlled over a period of time. HbA1c should be below 7.0%.
Controlling blood pressure	People with diabetes should keep their blood pressure below 130/80.
Testing and controlling cholesterol	People with diabetes should have their cholesterol checked at least annually and keep LDL cholesterol below 100 mg/dl.
Annual retinal eye exam	People with diabetes should receive an annual eye exam to check the retina for damage.
Medical care to treat or avoid kidney damage (nephropathy)	People with diabetes should have a urine test for protein, receive medications to protect the kidneys (ace inhibitors or angiotensin receptor blockers), and see a kidney specialist if indicated.
<b>Indicators of Good Cardiac Care</b>	
Controlling high blood pressure	People with high blood pressure who do not have diabetes or heart disease should keep it under 140/90 to avoid complications, which include heart attack, stroke, and kidney disease. People with diabetes or heart disease should keep their blood pressure below 130/80.
Using beta blockers after heart attack	People who have had a heart attack should receive a prescription for a beta blocker afterwards and continue to take it long-term to improve heart function and prevent another heart attack.
Cholesterol management for patients with cardiovascular conditions (heart attack, coronary artery bypass graft, angioplasty, or ischemic vascular disease)	People with cardiovascular conditions should have their cholesterol tested at least annually and keep LDL cholesterol below 100 mg/dl to prevent further heart problems.
<b>Indicators of Good Mental Health Care</b>	
Anti-depressant medication management	People with a new diagnosis of depression should have at least three visits with a provider in the 12 weeks after diagnosis. If on medication, they should stay on the medication for at least 3-6 months.
Follow-up visit after mental illness hospital stay	People who are hospitalized should receive a follow up visit within 7 days and no later than 30 days after discharge.
Initiation of and engagement in alcohol or drug dependence treatment	People with alcohol and drug dependence should get treatment and continue in treatment. They should have one visit within 14 days of diagnosis, and two more visits within 30 days of the first visit.

<sup>1</sup> Based on Health Plan and Employer Data and Information Set measures from the National Committee on Quality Assurance

# Personal Health Screening Checklist

This chart describes certain health tests and screenings that adults need to have periodically. Your needs will vary based on your risk factors, so this chart is only a guide. Discuss your personal needs with your doctor.

Screening/Test	Last Test Date and Result	Date of Next Test
For Both Men and Women		
<b>Height, Weight, Body Mass Index:</b> Annually		
<b>Blood Pressure:</b> Every 2 years or at every doctor visit		
<b>Cholesterol Check:</b> Baseline test at age 20, then every 5 years starting at age 45. Annually if at risk for coronary artery disease. (Risk factors: heart disease, high LDL or low HDL cholesterol, diabetes, high blood pressure, smoking, close relative with heart disease and/or stroke at a young age)		
<b>Colorectal Cancer Screening (Colonoscopy):</b> First test at age 50 for those at average risk. If there is a family history, have first test at age 40 or 10 years before the age at which a close relative was diagnosed—whichever is earlier. Repeat screenings as medically necessary. Discuss frequency with your doctor.		
<b>Diabetes Test (Blood Sugar):</b> Every 5 years for those over age 45. Every 5 years prior to age 45 for those who are overweight; have family history of diabetes; are Native American, African American, Hispanic, or Asian/South Pacific Islander; or have signs of insulin resistance or history of gestational diabetes. Annually for those with high cholesterol, high blood pressure, or high blood sugar.		
<b>Depression Screening:</b> If feeling unusually sad for more than 2 weeks.		
<b>Sexually Transmitted Diseases:</b> If sexually active, discuss necessary tests with your doctor.		
<b>Osteoporosis Screening:</b> Bone density test at age 65 for most individuals. Test at age 60 or earlier for those with risk factors (prior fractures; family history of fractures after age 50; being thin or small boned; smokers; using medications that increase risk).		
<b>Immunizations:</b> Influenza if over 50 or at risk, pneumonia (if over age 65 or at risk); as needed when traveling; discuss with your doctor		
For Women Only		
<b>Mammogram:</b> Every 2 years starting at age 40, and every year starting at age 50; more frequently and earlier if there is family history.		
<b>Pap Test:</b> Every 1-3 years after age 21 or younger for those who are sexually active. More frequent screening if previous test was abnormal.		
<b>Chlamydia Screening:</b> At least every three years for those who are sexually active.		
For Men Only		
<b>Prostate Cancer Screening:</b> Discuss risk factors with doctor to determine when to be screened.		
Use the space below for any additional tests recommended by your doctor		



# Body Mass Index Table and Formula

To determine your body mass index (BMI), find your height in inches in the left-hand column labeled “Height”, and move across to your Body Weight. The number at the top of the column is your BMI at that height and weight. Pounds have been rounded off.

BMI	Normal							Overweight				Obese					
	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
Height (inches)	Body Weight (pounds)																
58	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
59	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
60	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
61	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
62	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
63	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
64	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
65	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
66	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216
67	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
68	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
69	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
70	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
71	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
72	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
73	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
74	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
75	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
76	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287

If your height or weight is not in the chart above, you can calculate your BMI using the following formula:

$$\frac{\text{your weight in pounds} \times 703}{(\text{height in inches}) \times (\text{height in inches})}$$

Here is an example for someone who is 220 pounds and 75” tall:

$$\frac{220 \text{ lbs} \times 703}{(75 \text{ inches}) \times (75 \text{ inches})} = \text{BMI } 27.5$$

BMI under 18.5 – Underweight

BMI 18.5-24.9 – Normal

BMI 25-29 – Overweight (increased health risk\*)

BMI over 30 – Obese (increased health risk\*)

*\* Risk is even higher if waist measurement is over 40 inches for a man or over 35 inches for a woman.*

Source: National Heart, Lung, and Blood Institute

## Resources

All CalPERS members can visit our Web site at [www.calpers.ca.gov](http://www.calpers.ca.gov) for general information about CalPERS Health Plans and to access our Health Plan Chooser. To speak with someone at CalPERS about your health plan choices, you may call **888-CalPERS** (or 888-225-7377).

As a health care consumer, you have access to a wide variety of resources, services, and tools that can help you find the right health plan, doctor, medical group, and hospital for yourself and your family. There are also many resources available to help you take responsibility for your own health. Following are some helpful phone numbers and Web sites:

### Health Plan Contact Information

Health Plan	Phone Number	Web Site
Blue Shield of California (includes Access+ and NetValue)	(800) 334-5847 (toll free) (800) 241-1823 (toll free TTY) – for the hearing and speech impaired	<a href="http://www.blueshieldca.com">www.blueshieldca.com</a> (current members) <a href="http://www.blueshieldca.com/calpers">www.blueshieldca.com/calpers</a> (prospective members)
PERSCare, PERS Choice, or PERS Select ( <i>Blue Cross of California administers these self-funded plans.</i> )	(877) 737-7776 (toll free) (818) 234-5141 (outside the continental U.S.) (818) 234-3547 (TDD)	<a href="http://www.bluecrossca.com/calpers">www.bluecrossca.com/calpers</a>
Kaiser Permanente	(800) 464-4000 (toll free) (800) 777-1370 (toll free TTY) – for the hearing and speech impaired	<a href="http://my.kaiserpermanente.org/ca/calpers/">http://my.kaiserpermanente.org/ca/calpers/</a>

### Obtaining Hospital and Medical Group Quality Information

Following is a list of resources you can use to evaluate and select a doctor, medical group, and hospital.

Source	Web site	Description
Hospitals		
CalHospitalCompare	<a href="http://www.CalHospitalCompare.org">www.CalHospitalCompare.org</a>	CalHospitalCompare is a standardized, universal performance report card for California hospitals that includes patient experience and clinical quality measures. Spearheaded by the California Hospital Assessment and Reporting Taskforce (CHART), a coalition of purchaser, health plan, hospital, and consumer stakeholders, CHART is supported by CalPERS.
The Centers for Medicare and Medicaid Services (CMS)	<a href="http://www.hospitalcompare.hhs.gov">www.hospitalcompare.hhs.gov</a>	This site provides publicly reported hospital quality information, including measures on heart attacks, pneumonia, heart failure, and surgery.
HealthGrades	<a href="http://www.healthgrades.com">www.healthgrades.com</a>	HealthGrades uses data from Medicare and states to compare outcomes of care for common procedures.
The Leapfrog Group	<a href="http://www.leapfroggroup.org">www.leapfroggroup.org</a>	This is a coalition of health purchasers who have found that hospitals meeting certain standards have better care results.
Doctors and Medical Groups		
California Medical Board	<a href="http://www.medbd.ca.gov">www.medbd.ca.gov</a>	This is the State agency that licenses medical doctors, investigates complaints, disciplines those who violate the law, conducts physician evaluations, and facilitates rehabilitation where appropriate.

Source	Web site	Description
CalPERS On-Line	<a href="http://www.calpers.ca.gov">www.calpers.ca.gov</a>	This site contains information about how medical groups scored on providing the following: timely access to primary care doctors and specialists, access to a doctor by phone after hours, and correct emergency instructions. CalPERS works with the California Cooperative Healthcare Reporting Initiative to collect and report this information.
Office of the Patient Advocate	<a href="http://www.opa.ca.gov">www.opa.ca.gov</a>	This Web site includes a State of California-sponsored “Report Card” that contains additional clinical and member experience data on HMOs and medical groups in California.

## Helping You Take Responsibility for Your Health

The Internet provides a wealth of resources for managing your health and learning about various conditions and diseases. Following are some Web sites that can help you.

General Health Information	Web Site
National Institutes of Health	<a href="http://www.nih.gov">www.nih.gov</a>
Medline Plus	<a href="http://www.medlineplus.gov">www.medlineplus.gov</a>
Fitness, Nutrition, Prevention	<a href="http://www.healthierus.gov">www.healthierus.gov</a>
The Food and Drug Administration	<a href="http://www.fda.gov">www.fda.gov</a>
Healthfinder	<a href="http://www.healthfinder.gov">www.healthfinder.gov</a>
Mayo Clinic	<a href="http://www.mayoclinic.com">www.mayoclinic.com</a>
Web MD	<a href="http://www.webmd.com">www.webmd.com</a>
Helpful Information for Seniors	<a href="http://www.usa.gov/Topics/Seniors/Health.shtml">www.usa.gov/Topics/Seniors/Health.shtml</a>
Medical Research Information for Patients and Caregivers	<a href="http://www.patientinform.com">www.patientinform.com</a>
Making Your Wishes Known — Advance Directives	<a href="http://familydoctor.org">familydoctor.org</a>
California Coalition for Compassionate Care	<a href="http://www.finalchoices.calhealth.org">www.finalchoices.calhealth.org</a>

Condition and Disease Specific Information	Web Site
Asthma and Other Lung Diseases • National Heart Lung and Blood Institute • American Lung Association	<a href="http://www.nhlbi.nih.gov/index.htm">www.nhlbi.nih.gov/index.htm</a> <a href="http://www.lungusa.org">www.lungusa.org</a>
Cancer	<a href="http://www.cancer.gov/cancerinfo">www.cancer.gov/cancerinfo</a>
Diabetes • National Diabetes Education Program • American Diabetes Association • National Institutes of Health	<a href="http://www.ndep.nih.gov">www.ndep.nih.gov</a> <a href="http://www.diabetes.org/home.jsp">www.diabetes.org/home.jsp</a> <a href="http://www.diabetes.niddk.nih.gov">www.diabetes.niddk.nih.gov</a>
Digestive Diseases	<a href="http://www.digestive.niddk.nih.gov">www.digestive.niddk.nih.gov</a>
Heart Disease and Stroke	<a href="http://www.americanheart.org">www.americanheart.org</a>
Kidney Disease	<a href="http://www.kidney.niddk.nih.gov">www.kidney.niddk.nih.gov</a>
Osteoarthritis and other Musculoskeletal and Skin Diseases	<a href="http://www.niams.nih.gov">www.niams.nih.gov</a>
U.S. Department of Agriculture Food Pyramid	<a href="http://www.mypyramid.gov">www.mypyramid.gov</a>
BMI and Measuring Waist Circumference	<a href="http://www.methodisthealth.com/Interactive%20Health%20Tools/hip%20calc/hipcalc.html">www.methodisthealth.com/Interactive%20Health%20Tools/hip%20calc/hipcalc.html</a>
U.S. Department of Health and Human Services: Tips on being more physically active	<a href="http://www.smallstep.gov/sm_steps/sm_steps_index.html">www.smallstep.gov/sm_steps/sm_steps_index.html</a>





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